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Substitute for form 1449/PTO

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

of

Sheet

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Complete if Known				
Application Number	10/580,263			
§ 371 Date	May 25, 2006			
First Named Inventor	Sui Xiong CAI			
Art Unit	1626			
Examiner Name	(to be assigned)			
Attorney Docket Number	1735.0940001/RWE/BAH			

U.S. PATENT DOCUMENTS						
Examiner	Cite	Document Number	Publication Date	Name of Patentee or	Pages, Columns, Lines,	
Initials* No.1		Number-Kind Code <sup>2 (If Known)</sup>	MM-DD-YYYY	Applicant of Cited Document	Where Relevant Passages or Relevant Figures Appear	
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		Country Code <sup>3</sup> Number <sup>4</sup> Kind Code <sup>5</sup> (if known)			Relevant Passages or Relevant Figures Appear	T <sup>6</sup>	
/JC/	FP1	WO 2000/044216 A2	08-03-2000	Cytovia, Inc.			
/JC/	FP2	WO 2004/002428 A2	01-08-2004	Cytovia, Inc.			
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	FP4						
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	Non Patent Literature Documents				
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	NON PATENT LITERATURE DOCUMENTS				
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume number, publisher, city and/or country where published			
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	NON PATENT LITERATURE DOCUMENTS				
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume number, publisher, city and/or country where published	T <sup>2</sup>		
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